

0316615236

Form Approved. OMB No. 2050-0028 Expires 9-30-98
GSA No. 0246-EPA-07

Please print or type with ELITE type (12 characters per inch) in the unshaded areas only

Please refer to the Instructions for Filling Notification before completing this form. The information requested here is required by law (Section 3010 of the Resource Conservation and Recovery Act).



Notification of Regulated Waste Activity

United States Environmental Protection Agency

Date Received
(For Official Use Only)

DEC 24 1996

PROGRAM MANAGEMENT BRANCH

I. Installation's EPA ID Number (Mark 'X' in the appropriate box)



A. First Notification

B. Subsequent Notification
(Complete Item C)

C. Installation's EPA ID Number

22 R 000 031823

II. Name of Installation (Include company and specific site name)

ABBOTT

III. Location of Installation (Physical address not P.O. Box or Route Number)

Street

3630 S WELLS

Street (Continued)

City or Town

CHICAGO

State

Zip Code

IL 60609-

County Code

County Name

031 COOK

IV. Installation Mailing Address (See Instructions)

Street or P.O. Box

SAME

City or Town

State

Zip Code

V. Installation Contact (Person to be contacted regarding waste activities at site)

Name (Last)

(First)

HARDIN

CAROL

Job Title

Phone Number (Area Code and Number)

PRINCIPAL

773-535-1660

VI. Installation Contact Address (See Instructions)

A. Contact Address

Location: Mailing Other



B. Street or P.O. Box

City or Town

State

Zip Code

VII. Ownership (See Instructions)

A. Name of Installation's Legal Owner

CHICAGO PUBLIC SCHOOLS

Street, P.O. Box, or Route Number

1819 W PERSHING ROAD

City or Town

State

Zip Code

CHICAGO

IL 60609-

Phone Number (Area Code and Number)

B. Land Type

C. Owner Type

D. Change of Owner Indicator

(Date Changed)

773-535-7039

M

M

Yes

No

Month Day Year

ID - For Official Use Only

VIII. Type of Regulated Waste Activity (Mark 'X' in the appropriate boxes; Refer to instructions)

A. Hazardous Waste Activity

1. Generator (See instructions)
☐ a. Greater than 1000 kg/mo (2,200 lbs.)
☒ b. 100 to 1000 kg/mo (200-2,200 lbs.)
☐ c. Less than 100 kg/mo (220 lbs.)
2. Transporter (Indicate Mode in boxes 1-5 below)
☐ a. For own waste only
☐ b. For commercial purposes
- Mode of Transportation
☐ 1. Air
☐ 2. Rail
☒ 3. Highway
☐ 4. Water
☐ 5. Other - specify _____
3. Treater, Storer, Disposer (at installation) Note: A permit is required for this activity; see instructions.
4. Hazardous Waste Fuel
☐ a. Generator Marketing to Burner
☐ b. Other Marketers
☐ c. Boiler and/or Industrial Furnace
☐ 1. Smelter/Referral
☐ 2. Small Quantity Exemption
 Indicate Type of Combustion Device(s)
☐ 1. Utility Boiler
☐ 2. Industrial Boiler
☐ 3. Industrial Furnace
☐ 5. Underground Injection Control

B. Used Oil Recycling Activities

1. Used Oil Fuel Marketer
☐ a. Marketer Directs Shipment of Used Oil to Off-Specification Burner
☐ b. Marketer Who First Claims the Used Oil Meets the Specifications
2. Used Oil Burner - Indicate Type(s) of Combustion Device(s)
☐ a. Utility Boiler
☐ b. Industrial Boiler
☐ c. Industrial Furnace
3. Used Oil Transporter - Indicate Type(s) of Activity(ies)
☐ a. Transporter
☐ b. Transfer Facility
4. Used Oil Processor/Re-refiner - Indicate Type(s) of Activity(ies)
☐ a. Process
☐ b. Re-refine

IX. Description of Hazardous Waste (Use additional sheets if necessary)

A. Characteristics of Nonlisted Hazardous Wastes. (Mark 'X' in the boxes corresponding to the characteristics of nonlisted hazardous wastes your installation handles; See 40 CFR Parts 261.20 - 261.24)

1. Ignitable (D001) ☐ 2. Corrosive (D002) ☐ 3. Reactive (D003) ☐ 4. Toxicity Characteristic (List specific EPA hazardous waste number(s) for the Toxicity characteristic contaminant(s))

B. Listed Hazardous Wastes. (See 40 CFR 261.31 - 33; See instructions if you need to list more than 12 waste codes.)

1 D008	2	3	4	5	6
7	8	9	10	11	12

C. Other Wastes. (State other wastes requiring a handler to have an I.D. number; See instructions.)

1	2	3	4	5	6
---	---	---	---	---	---

X. Certification

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Signature

Carol W. [Signature]

Name and Official Title (Type or print)

DIRECTOR / REG. COMPLIANCE

Date Signed

12/11/96

XI. Comments

SHOULD BE CLASSIFIED AS GENERATOR ONLY.

Note: Mail completed form to the appropriate EPA Regional or State Office. (See Section of the booklet for addresses.)

12/26/96
[Signature]

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Notification of Regulated Waste Activity

United States Environmental Protection Agency

Date Received
(For Official Use Only)

NOV 04 1998

U. S. EPA, REGION V

I. Installation's EPA ID Number (Mark 'X' in the appropriate box)



A. First Notification



B. Subsequent Notification
(Complete item C)

C. Installation's EPA ID Number

ILR0000031823

II. Name of Installation (Include company and specific site name)

ROBERT ABBOTT SCHOOL

III. Location of Installation (Physical address not P.O. Box or Route Number)

Street

3630 SWELLS STREET

Street (Continued)

City or Town

CHICAGO

State

IL

Zip Code

60609

County Code

031

County Name

COOK

IV. Installation Mailing Address (See Instructions)

Street or P.O. Box

8501 W 191ST STREET BOX 10

City or Town

MOKENA

State

IL

Zip Code

60448

V. Installation Contact (Person to be contacted regarding waste activities at site)

Name (Last)

CONNELLY

(First)

THOMAS

Job Title

MANAGER

Phone Number (Area Code and Number)

108-923-0202

VI. Installation Contact Address (See Instructions)

A. Contract Address
Location Mailing Other



B. Street or P.O. Box

8501 W 191ST STREET BOX 10

City or Town

MOKENA

State

IL

Zip Code

60448

VII. Ownership (See Instructions)

A. Name of Installation's Legal Owner

CHICAGO PUBLIC SCHOOLS

Street, P.O. Box, or Route Number

1819 W PERSHING ROAD (6WW)

City or Town

CHICAGO

State

IL

Zip Code

60609

Phone Number (Area Code and Number)

773-535-7038

B. Land Type

M

C. Owner Type

M

D. Change of Owner Indicator

Yes

No

(Date Changed)
Month Day Year

0316615236

RCRIS ENTRY NOV 06 1998

RECEIVED

OCT 23 1998

ID For Official Use Only

VIII. Type of Regulated Waste Activity (Mark 'X' in the appropriate boxes; Refer to Instructions)

A. Hazardous Waste Activity

1. Generator (See Instructions)
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- ☐ b. 100 to 1000 kg/mo (200-2,200 lbs.)
- ☒ c. Less than 100 kg/mo (220 lbs.)

2. Transporter (Indicate Mode in boxes 1-5 below)

- ☒ a. For own waste only
- ☐ b. For commercial purposes

Mode of Transportation

- ☐ 1. Air
- ☐ 2. Rail
- ☒ 3. Highway
- ☐ 4. Water
- ☐ 5. Other - specify _____

- ☐ 3. Treater, Storer, Disposer (at Installation) Note: A permit is required for this activity; see instructions.

4. Hazardous Waste Fuel

- ☐ a. Generator Marketing to Burner
- ☐ b. Other Marketers
- ☐ c. Boiler and/or Industrial Furnace

- ☐ 1. Smelter/Referral
- ☐ 2. Small Quantity Exemption
- Indicate Type of Combustion Device(s)

- ☐ 1. Utility Boiler
- ☐ 2. Industrial Boiler
- ☐ 3. Industrial Furnace

- ☐ 5. Underground Injection Control

B. Used Oil Recycling Activities

1. Used Oil Fuel Marketer
- ☐ a. Marketer Direct Shipment of Used Oil to Off-Specification Burner
- ☐ b. Marketer Who First Claims the Used Oil Meets the Specifications

2. Used Oil Burner - Indicate Type(s) of Combustion Device(s)

- ☐ a. Utility Boiler
- ☐ b. Industrial Boiler
- ☐ c. Industrial Furnace

3. Used Oil Transporter - Indicate Type(s) of Activity(ies)

- ☐ a. Transporter
- ☐ b. Transfer Facility

4. Used Oil Processor/Re-refiner - Indicate Type(s) of Activity(ies)

- ☐ a. Process
- ☐ b. Re-refine

IX. Description of Hazardous Wastes (Use additional sheets if necessary)

A. Characteristics of Nonlisted Hazardous Wastes. (Mark 'X' in the boxes corresponding to the characteristics of nonlisted hazardous wastes your installation handles; See 40 CFR Parts 261.20 - 261.24)

1. Ignitable (D001)

☐

2. Corrosive (D002)

☐

3. Reactive (D003)

☐

4. Toxicity Characteristic

☐

(List specific EPA hazardous waste number(s) for the Toxicity characteristic contaminant(s))

D008 D006 D009 MN03

B. Listed Hazardous Wastes. (See 40 CFR 261.31 - 33; See Instructions if you need to list more than 12 waste codes.)

1	2	3	4	5	6
P	C	Z	B		
7	8	9	10	11	12

1	2	3	4	5	6
7	8	9	10	11	12

1	2	3	4	5	6
7	8	9	10	11	12

1	2	3	4	5	6
7	8	9	10	11	12

1	2	3	4	5	6
7	8	9	10	11	12

1	2	3	4	5	6
7	8	9	10	11	12

C. Other Wastes. (State or other wastes requiring a handler to have an I.D. number; See Instructions.)

1	2	3	4	5	6
X	D	0	0	2	

1	2	3	4	5	6

1	2	3	4	5	6

1	2	3	4	5	6

1	2	3	4	5	6

1	2	3	4	5	6

X. Certification

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Signature

Nancy Weyh

Name and Official Title (Type or print)

Nancy Weyh - Mgr

Date Signed

10-21-98

XI. Comments

Note: Mail completed form to the appropriate EPA Regional or State Office. (See Section III of the booklet for addresses.)



UNITED STATES ENVIRONMENTAL PROTECTION AGENCY

REGION 5

77 WEST JACKSON BOULEVARD

CHICAGO, IL 60604-3590

November 18, 1998

REPLY TO THE ATTENTION OF:

Mr. Thomas Connelly
8501 W 191st Street
Box 10
Mokena, IL 60448

RECEIVED
NOV 20 1998

RE: US EPA ID Number ILR 000 031 823

Location: 3630 South Wells Street
Chicago, IL 60609

RCRA RECORDS ROOM
Waste, Pesticides & Toxic Substances
U.S. EPA - REGION 5

In response to your correspondence of 10/12/98, the following
information has been updated:

MAILING ADDRESS CHANGED TO:
CONTACT PERSON CHANGED TO:
CONTACT PERSON'S PHONE NUMBER:
NAME OF LEGAL OWNER:
GENERATOR STATUS CHANGED TO:
HAZARDOUS WASTE ACTIVITY:
ADDITION OF WASTE CODES:

8501 W 191ST Street Box 10
Thomas Connelly
(708) 923-0202
Chicago Public Schools
Conditionally Exempt Generator
Transporter by Highway Added
D006, D009, and X002

If you have any questions, please call me at (312) 886-6173.

Sincerely,

Sharon J. Kiddon
RCRA Notification Program Manager

cc: State Agency
File

1. The first part of the paper is devoted to a discussion of the general principles of the theory of the structure of the atom.

2. The second part of the paper is devoted to a discussion of the general principles of the theory of the structure of the atom.